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25461 7590 05/19/2006					-			
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ATLANTA, GA 30309-3592					(Depositor's name)			
					(Signature)			
					·		(Date)	
APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/696,134 10/29/2003 Kazutoshi Toda				oda	033737.028 5520			
TITLE OF INVENTION: BEARING PART AND FABRICATION METHOD THEREFOR								
APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLICATION FEE	TOTAL FEE(S	DUE	DATE DUE	
nonprovisional	NO	\$1400	l	\$300	\$1700		08/21/2006	
EXAMINER		ART UNIT		CLASS-SUBCLASS				
FOOTLAND, LENARD A		3682		384-569000	_	_		
1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list							CAMPDELL	
CFR 1.363). Change of correspondence address (or Change of Correspondence or agents OR, a				of up to 3 registered pater	nt attorneys 1_	SHIII	, GAMBRELL &	
Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form registered att PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer 2 registered pt 2 registered pt 2 registered pt 2 registered pt 3 registered pt				a single firm (having as a member a ney or agent) and the names of up to ent attorneys or agents. If no name is will be printed.				
								3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
KOYO SEIKO CO., LTD. OSAKA, JAPAN								
	assignee category or catego	ries (will not be pri			Corporation or other	private gro	oup entity Government	
		·-·	. Payment of Fee(-		
4a. The following fee(s) are Issue Fee	s): e amount of the fee(s) is en	alassa (Check	. No c	1755861				
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Advance Order # of Conies V The Director				s hereby authorized by ch	arge the required fe	e(s), or cred	dit any overpayment, to	
			Deposit Accou	int Number <u>02-430</u>	0(encl	osé an extra	a copy of this form).	
5. Change in Entity Status (from status indicated above) \[\begin{align*} \begi								
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Authorized Signature 4-P				Date 08/01/2006 MREYENED 00000027 10696134				
Typed or printed name _	Glenn J. Per	<u> </u>		01 FC:: Regi gg aque:			1400.00 OP 	
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